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PTO/SB/81 (11-96)

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AUTHORIZATION OF AGENT,  
NOT ACCOMPANYING  
APPLICATION**

Application Number	09/987,238
Filing Date	November 14, 2001
First Named Inventor	Paul Andrew Kelly
Group Art Unit	3728
Examiner Name	
Attorney Docket Number	1332.0191

I hereby appoint:

☐ Practitioners at Customer Number  →Place Customer  
Number Bar Code  
Label here☒ Practitioner(s) named below:

Name	Registration Number
Ira C. Edell	24,119
Robert H. Epstein	24,353
Stuart B. Shapiro	40,169
Patrick J. Finnan	39,189

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the Patent and Trademark Office connected therewith.

Please change the correspondence address for the above-identified application to:

☐ The above-mentioned Customer Number.  
**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Ira C. Edell		
Address	EPSTEIN, EDELL, SHAPIRO, FINNAN & LYTLE, LLC		
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City	Rockville	State	MD
		ZIP	20850
Country	US		
Telephone	301-424-3640	Fax	301-762-4056

I am the:

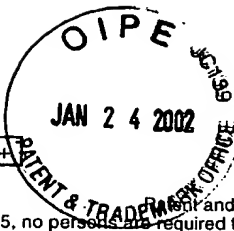
☒ Applicant.☐ Assignee of record of the entire interest  
*Certificate under 37 CFR 3.73(b) is enclosed***SIGNATURE of Applicant or Assignee of Record**

Name	Paul Andrew Kelly	Lee Paul Shuttleworth
Signature		
Date	15 JAN 2002	15.01.02

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JAN 24 2002



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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> (37 CFR 1.63)  <input type="checkbox"/> Declaration Submitted with Initial Filing      OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	1332.0191
	<b>First Named Inventor</b>	Paul Andrew Kelly
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	09 / 987,238
	<b>Filing Date</b>	11/14/2001
	<b>Group Art Unit</b>	3728
<b>Examiner Name</b>		

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**Studded Footwear**

the specification of which  
☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **11/14/2001** as United States Application Number or PCT International Application Number **09/987,238** and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
0027750.9	GB	11.14.00	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	
60/249,461	11/20/2000	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Name	Registration Number	Name	Registration Number
Ira C. Edell	24,119	Stuart B. Shapiro	40,169
Robert H. Epstein	24,353	Patrick J. Finnan	39,189
Karen M. Gerken	31,161	J. Warren Lytle, Jr.	39,283
		Andrew J. Aldag	40,483

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number  OR ☒ Correspondence address below

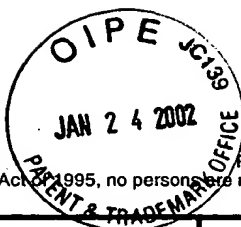
Name	Ira C. Edell				
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Address	1901 Research Blvd., Suite 400				
City	Rockville	State	MD	ZIP	20850
Country	U.S.	Telephone	(301) 424-3640	Fax	(301) 762-4056

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))		Family Name or Surname			
Paul Andrew		Kelly			
Inventor's Signature				Date	15/01/02
Residence: City	Atherstone	State		Country	United Kingdom
Post Office Address	10 Simmonds Way				
Post Office Address	Atherstone				
City	Warwickshire	State		ZIP	CV9 3AX
				Country	United Kingdom

☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## DECLARATION

ADDITIONAL INVENTOR(S)  
Supplemental Sheet  
Page 2 of 2

<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Lee Paul				Shuttleworth			
Inventor's Signature						Date	15.01.02
Residence: City	Hall Green	State		Country	United Kingdom	Citizenship	
Post Office Address		19 Woodford Green Road					
Post Office Address		Hall Green					
City	Birmingham	State		ZIP	B28 8PH	Country	United Kingdom
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature						Date	
Residence: City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

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